STA	TE OF INDIANA) PRINT THE NAME OF THE COUNTY WHERE YOU ARE SUPERIOR/CIRCUIT COURT FILING THESE PAPERS SUPERIOR/CIRCUIT COURT
COU	PRINT THE NAME OF THE COUNTY WHERE YOU ARE FILING THESE PAPERS) SS: CASE NO
IN F	RE THE MARRIAGE OF:
	YOUR CURRENT FULL NAME. ARE THE PETITIONER
Petit	tioner,
V.	
	TYOUR SPOUSE'S FULL NAME. HE IS THE RESPONDENT
	pondent.
	APPEARANCE BY SELF-REPRESENTED PERSON IN CIVIL CASE
	This Appearance Form must be filed on behalf of every party in a civil case.
-	My Name is: and I am
	Initiating (filing) X; Responding (answering or defending); or Intervening;
in th	is case and am representing myself.
Cou prot prov	2. Contact information for receiving legal service of documents and case information is required by rt Rules: (NOTE: If you are the Initiating party and this case, or a related case, involves a ection from abuse order, a workplace violence restraining order, or a no-contact order, you must vide an address for the purpose of legal service of documents but that address should not be one that uses the whereabouts of a petitioner)
	Address: PRINT YOUR FULL ADDRESS
	Email Address: PRINT YOUR EMAIL ADDRESS
	Phone: PRINT YOUR PHONE NUMBER
	FAX: PRINT YOUR FAX NUMBER
· · · · · · · · · · · · · · · · · · ·	if in the related case, you have used the Attorney General Confidential address, you may check the below:
IF YOU USE A CONFIDENTIAL ADDRESS THROUGH THE OFFICE OF THE ATTORNEY GENERAL.	Attorney General confidential address (contact the Attorney General at 1-800-321-1907 or e-mail address is confidential@atg.state.in.us).
OLIFOK LIÉDE	3. This is a <u>LEAVE BLANK</u> case type as defined in administrative Rule 8(B)(3). (<i>Clerk will supply this information.</i>)
4	I will accept service by FAX at the following number TO RECEIVE COURT PAPERS, PRINT IT HERE

DIVORCE WITH CHILDREN AND WITH AN AGREEMENT ON ALL ISSUES

support may be an issue, and social security	INS), guardianship, or any other proceedings in which numbers of all family members are supplied on a separately led as confidential information on light green paper.
X Yes No	
6. There are related cases: Yes No	(If yes, please indicate below.) IF THERE ARE OTHER COURT CASES INVOLVING YOURSELF, YOUR SPOUSI AND/OR YOUR CHILD(REN). CHECK "YES"; OTHERWISE, CHECK "NO"
Caption and case number of related cases:	
IF YOU CHECKED "NO" FOR #6, SKIP. IF YOU CHECKED "YES" FOR #6, PRINT THE CAPTION AND CASE NUMBER FOR EACH RELATED CASE	Case Number:
Caption:	Case Number:
7. Additional information required by local IF NECESSARY, PRINT ADDITIONAL INFORMATION	
	SIGN YOUR NAME Self-Represented Party
	I

5. This case is a domestic relations matter, involves reciprocal enforcement of support, paternity,

NOT FOR PUBLIC ACCESS IN ACCORDANCE WITH ADMINISTRATIVE RULE 9

ATTENTION CLERK: FOR SELF REPRESENTED LITIGANTS, TREAT THIS FORM AS IF IT IS PRINTED ON LIGHT GREEN PAPER

ATTORNEYS MUST SUBMIT THIS FORM ON LIGHT GREEN PAPER. SEE BOTTOM OF PAGE FOR TEXT OF TRIAL RULE 5 (G) (2)) IN THE _____SUPERIOR/CIRCUIT COURT STATE OF INDIANA) SS: COUNTY OF CASE NO. ____ IN RE THE MARRIAGE OF Petitioner. FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE INFORMATION HERE AS IT APPEARS ON THE APPEARANCE V. Respondent.

CIVIL APPEARANCE FORM Item 5 (Social Security numbers of all family members in cases involving support): PRINT THE NAME AND SOCIAL SECURITY NUMBER OF EACH MINOR CHILD YOU HAVE WITH THE OTHER PARTY WITH WHOM YOU ARE PAYING CHILD SUPPORT SS# Name: SS# Name: SS # ____ Name: SS # _____ Name: SS # Name: Name: SS# SS# Name: **Item 8** (Social Security number of person who is subject to involuntary commitment): Name: SS # When only a portion of a document contains information excluded from public access pursuant to

Administrative Rule 9(G)(1), said information shall be omitted [or redacted] from the filed document and set forth on a separate accompanying document on **light green paper** conspicuously marked "Not For Public Access" and clearly designating [or identifying] the caption and number of the case and the document and location within the document to which the redacted material pertains.

NOT FOR PUBLIC ACCESS

DIVORCE WITH CHILDREN AND WITH AN AGREEMENT ON ALL ISSUES

STATE OF INDIANA)	IN THE	SUPERI	OR/CIRCUIT COURT				
COUNTY OF) SS:)	CASE NO).					
IN RE	THE MARRIAGE OF:								
Petition	ner,			FOR THE SECTION ABOVE THE DO	OTTED LINE LOOK AT				
V.		ED OUT AND PRINT THE RS ON THE APPEARANCE							
Respon	ndent.								
	VERIFIED PET	TITIO	N FOR DI	SSOLUTION OF MARRI	AGE				
The Pe	titioner,PRINT YOUR	FULL NA	AME		, now states:				
1.	Petitioner and Respondent were print the month and Year that you separated.	vere m	arried on <u>T</u> i	RINT THE DAY, MONTH AND YEAR HAT YOU WERE MARRIED, and sep	parated on				
2.	PRINT THE NAME OF THE PERSON THE COUNTY FOR THE LAST THRE continuous resident of PRINT WHER	EE MON	THS.		has been a months.				
3.	PRINT THE NAME OF THE PERSON THE STATE OF INDIANA FOR THE L			OUR SPOUSE) WHO HAS LIVED IN	has been a				
	continuous resident of the State of Indiana for the last 6 months. PRINT THE NUMBER OF MINOR CHILDREN THAT YOU AND THE OTHER PARTY HAVE TOGETHER children of the marriage; namely:								
4.	There are PARTY HAVE TOGETHER	ch	ildren of th	e marriage; namely:					
	Name]	Date of birth					
	PRINT THE NAME AND DATE OF BIRTH	OF EACH	I CHILD YOU HA	AVE WITH YOUR SPOUSE					
5	That				is fit and many				
5.	That PRINT THE NAME OF THE PARE	ENT YOU	want to have	CUSTODY OF THE CHILDREN	is fit and proper				

person to have custody of the minor children.

	6.	Debts and property:						
IF THERE ARE NO DEE OR PROPERTY TO DIV CHECK THE FIRST BO	/IDE,		There are no debts / personal proper	rty to divide.				
THERE IS PROPERTY YOUR SPOUSE HAS T YOU WANT OR DEBTS YOU OWE THAT YOU	THAT S THAT THINK		Petitioner wishes the Court to divid	e the following debts / personal p	roperty:			
YOUR SPOUSE SHOU PAY, CHECK THE SEC BOX AND LIST THE ITE	OND		a					
			b					
			c					
			d					
	7.	PRINT TI	HE NAME OF THE WIFE IF SHE IS NOT PREGNA	nt is not pregna	nt.			
	8.	Neither party is a member of the military.						
	9.	This marriage has suffered an irretrievable breakdown and should be dissolved.						
	10.	Chang	e of name:					
IF YOU ARE THE HUSB YOU MUST LEAVE THIS		Wi	ife would like her former name of		restored to her.			
BLANK. IF YOU ARE TH CHECK THE APPROPR BOX	E WIFE, S	Wife does not want to change her name.						
ВОХ		I affirr	m under the penalties of perjury that	the foregoing representations are	true.			
				SIGN YOUR NAME				
				Signature				
				PRINT YOUR FULL NAME				
				PRINT YOUR STREET ADDRESS				
				PRINT YOUR CITY, STATE AND ZIP (CODE			

STATI	E OF INDIANA)) SS:	IN THE	SUPERIOR/CIRCUIT COURT				
COUN	TY OF)	CASE NO.					
IN RE	IN RE THE MARRIAGE OF:							
Petition V.	ner,		THE	R THE SECTION ABOVE THE DOTTED LINE, LOOK AT E APPEARANCE YOU JUST FILLED OUT AND PRINT THE ORMATION HERE AS IT APPEARS ON THE APPEARANCE				
Respon	ndent. <u>VERIF</u>	TED V	WAIVER OF	FINAL HEARING				
Verifie	Come now Petitioner and Respondent pursuant to Ind. Code 31-1-11.5-8 and submit their Verified Waiver of Final Hearing. In support of this Waiver, the parties state that:							
1.	More than sixty (60) days have elapsed since the filing of Petitioner's Verified Petition for Dissolution of Marriage;							
2.	Both parties request the Cou of Marriage.	rt to a	oprove their S	ettlement Agreement and Decree of Dissolution				
3.	Both parties voluntarily wai	ve the	opportunity to	hold a final hearing on contested issues.				
I affirm under the penalties of perjury that the foregoing representations are true.								
SIGN YOUR NAME Your Signature				USE SIGN HIS/HER NAME rr Spouse's Signature				
PRINT Y	OUR FULL NAME	_	SPO	USE PRINT HIS/HER FULL NAME				
PRINT YOUR STREET ADDRESS		_		JSE PRINT HIS/HER STREET ADDRESS				
PRINT YOUR CITY, STATE AND ZIP CODE		_	SPO	JSE PRINT HIS/HER CITY, STATE AND ZIP CODE				

DIVORCE WITH CHILDREN AND WITH AN INSTRUCTIONS AGREEMENT ON ALL ISSUES STATE OF INDIANA SUPERIOR/CIRCUIT COURT IN THE) SS: COUNTY OF CASE NO. IN RE THE MARRIAGE OF: Petitioner, FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE INFORMATION HERE AS IT APPEARS ON THE APPEARANCE V. FILL OUT THE REST OF THE FORM AS TO YOU AND YOUR SPOUSE'S AGREEMENT. COMPLETE ANY BLANKS THAT REQUIRE INFORMATION. Respondent. -----DECREE OF DISSOLUTION OF MARRIAGE AND SETTLEMENT AGREEMENT The parties having submitted their Settlement Agreement and the court having seen and considered the Verified Petition for Dissolution of Marriage and Verified Waiver of Final Hearing submitted by the parties, now approves the following agreement: 1. The parties were married on , and separated on . 2. has been a continuous resident of County for the last three months, and the State of Indiana for the last six months prior to the filing of the Verified Petition for Dissolution of Marriage. 3. is not pregnant. Neither party is a member of the military. 4. 5. There were children born of this marriage; namely; Date of birth Name

6. The parties agree and state that it is in the best interest of the child(ren) that:

Petitioner shall have sole physical and legal custody of the child(ren).

Respondent shall have sole physical and legal custody of the child(ren).

Petitioner shall have sole physical custody and the parties shall have joint legal custody of the child(ren)

		Respondent shall have sole physical custody and the parties shall have joint legal custody of the child(ren).
		Other:
7.	The p	arties have agreed on the following Parenting Time (Visitation) order:
		Petitioner shall have reasonable visitation with the minor child(ren) as the parties agree or according to the Indiana Parenting Time guidelines.
		Respondent shall have reasonable visitation with the minor child(ren) as the parties agree or according to the Indiana Parenting Time guidelines.
		Other:
		will pay child support to f per week, as shown by the attached child support worksheet, County Clerk's office, or by income withholding order if available from the employer,
begin		the first Friday following the date of the decree. Said date is will be responsible for the
first shall	be respo	of uninsured medical expenses for the minor child(ren). Thereafter, Father onsible for% of uninsured medical expenses, and Mother shall be responsible for funinsured medical expenses for the minor child(ren).
9.	The p	arties have agreed on the following provisions for health insurance maintenance:
	medio	shall maintain cal, dental, and optical insurance as available through employment on the minor child(ren):
10.		arties have agreed on the following arrangement for claiming the tax credits, exemptions, ns for the minor child(ren):
		Petitioner shall be entitled to claim the minor child(ren) for federal, state, and local income tax purposes on an annual basis; Respondent shall sign all necessary documents that will entitle Petitioner to do so.
		Respondent shall be entitled to claim the minor child(ren) for federal, state, and local income tax purposes on an annual basis; Petitioner shall sign all necessary documents that will entitle Respondent to do so.
		Petitioner and Respondent shall each be entitled to claim the minor child(ren) for federal, state, and local income tax purposes in alternating years; Petitioner shall be entitled to claim the minor child(ren) in the year, and every year thereafter; Respondent shall be entitled to claim the minor child(ren) in the year, and every year thereafter.
D.	2 - 6 5	Other:Form PS-31152-3
RAGE	2 of 5	Form PS-31152-3

11.	The pa	arties have agreed on the following debt division:							
		The parties already have divided their debts.							
		Petitioner will be solely responsible for and shall hold Respondent harmless from, the following debts:							
		Name of Creditor	Amount of Debt						
		Respondent will be solely responsible for, and shall following debts:	hold Petitioner harmless from the						
		Name of Creditor	Amount of Debt						
12.	The pa	arties have agreed on the following vehicle division:							
		There are no vehicles to divide.							
		Petitioner will have sole possession of the following execute all documents necessary to transfer title of sthe date of this Order:							
		Vehicle #1, Make, Model, and Year							
		Vehicle #2, Make, Model, and Year							

DIVORCE WITH CHILDREN AND WITH AN AGREEMENT ON ALL ISSUES

		Respondent will have sole possession of the following vehicles, and Petitioner shall execute all documents necessary to transfer title of said vehicles within thirty (30) days of the date of this Order:
		Vehicle #1, Make, Model, and Year
		Vehicle #2, Make, Model, and Year
13.	The p	parties have agreed on the following property division:
		The parties already have divided all items of property.
		Petitioner will have sole possession of the following items of property:
		Respondent will have sole possession of the following items of property:
14.	The r	narriage has suffered an irretrievable breakdown and should be dissolved.
15.	Chan	ge of names:
		Wife would like her maiden name or previous married name of restored to her.
		Wife does not want to change her name.

The parties have disclosed all relevant documents and exchanged all information on value of property, pensions, real estate, and other assets and debts. The parties agree that this division of property is/is not an approximate equal division of the assets and debts. The parties agree that if this division is not a nearly equal division, that the deviation from the presumptive equal division should be accepted by the Court because it is the parties' agreement and neither party has been forced or threatened to accept this agreement.

DIVORCE WITH CHILDREN AND WITH AN AGREEMENT ON ALL ISSUES

I affirm under the penalties of perjury that the foregoing representations are true.

SIGN YOUR NAME AND PRINT YOUR FULL NAME	IN FRONT OF A LICENSED NOTARY PUBLIC.
Your Signature	
STATE OF INDIANA) COUNTY OF) SS	THE NOTARY PUBLIC WHO WITNESSED YOUR SIGNATURE WILL FILL OUT THESE BLANKS.
	11: 10
County, State of Indiana, personally app first duly sworn upon his/her oath, says Date	, a notary public in and for, and he/she being that the facts alleged in the foregoing instrument are true.
MY COMMISSION EXPIRES:	Notary Public
Your Spouse's Signature	THE NOTARY PUBLIC WHO WITNESSED YOUR SPOUSE'S SIGNATURE WILL FILL OUT THESE BLANKS.
COUNTY OF	
State of Indiana, personally appearedsworn upon his/her oath, says that the fa Date	, a notary public in and for county and he/she being first duly acts alleged in the foregoing instrument are true.
MY COMMISSION EXPIRES:	Notary Public
IT IS THEREFORE ORDERED by the terms of their agreement as set out above	ne Court that the parties' marriage is hereby dissolved, and the e shall be incorporated into this Order.
Date	Judge
Distribution:	
PRINT YOUR FULL NAME	PRINT YOUR SPOUSE'S FULL NAME
PRINT YOUR STREET ADDRESS	PRINT YOUR SPOUSE'S STREET ADDRESS
PRINT YOUR CITY. STATE AND ZIP CODE	PRINT YOUR SPOUSE'S CITY, STATE AND ZIP CODE

STATE OF IN	DIANA)	IN THE		SUPERIOR/CIRCUIT COURT			
COUNTY OF) SS:)	CASE N	0.				
IN RE THE MA	ARRIAGE OF:							
Petitioner,				FOR THE SECTION AB	OVE THE DOTTED LINE, LOOK AT			
V.		THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE INFORMATION HERE AS IT APPEARS ON THE APPEARANCE						
Respondent.								
	[For	Disso		MONS Marriage Cases Onl	vl			
The State of Inc	diana to Respondent:				7.1			
				JSE'S STREET ADDRES	SS			
		PRINT	YOUR SPO	JSE'S CITY, STATE AND	ZIP CODE			
Court named al In order your attorney. hereof, your ma entered by defa child/children, distribution of a from actions in appearance, you	You have been sued by your spouse for dissolution of your marriage. The case is pending in the Court named above. In order to participate in the proceedings, you must enter a written appearance in person or by your attorney. In the event you do not enter a written appearance within sixty (60) days of the date hereof, your marriage can be dissolved by Decree of the Court by default. In the event a Decree is entered by default, it may contain a judgment against you and provisions regarding the custody of your child/children, support for your child/children, parenting time (visitation) with your child/children, distribution of assets, and payment of debts. The Decree may also require you to take actions or refrain from actions in order to carry out the terms of the Court's Decree. If you do not enter a written appearance, you will receive no further notice of these proceedings. If you wish to countersue, you must do so by written petition filed herein not more than sixty (60) days from the date hereof.							
Dated:		-		Clerk,	County			
					County			
DESIGNATE HOW YOU WANT YOUR SPOUSE TO	manner of Service of Registered / Certified Service by Sheriff on Service by Sheriff at	l Mail Indiv	to be sent idual at ac	by the Clerk ldress shown above	address of spouse's employer):			

DIVORCE WITH CHILDREN AND WITH AN AGREEMENT ON ALL ISSUES

SHERIFF'S RETURN OF SERVICE OF SUMMONS

I hereby cer	rtify that I have served this s	ummons on the	day of	
1.	By delivering a copy of t	he Summons and a	copy of the Peti	tion to the Respondent
identified o	n the first page of Summons			
2.	By leaving a copy of the	Summons and a co	py of the Petition	n at
		, which is	the dwelling pla	ce or usual place of abode
and by mail	ling a copy of the Summons	to the Respondent a	t the above addi	ress.
3.	Other Service or Remark	S:		
	Sheriff's Costs	Sheriff By:		
	CLERK'	S CERTIFICATE		
I he	reby certify that on the			
Summons a	and a copy of the Petition to	the Respondent ider	ntified on the first	st page of the Summons by
(registered	or certified mail), [] requ	esting a return rece	ipt, at the addres	ss provided by the Petition
		-		
Dated:	, 20	Clerk, By:		County
		Zy.	Deputy	
	RETURN ON	SERVICE OF SU	MMONS BY M	IAIL
I he	reby certify that the attached	receipt was receive	ed by me showing	ng that the Summons and a
copy of the	Petition mailed to the Respo	ondent identified on	the first page of	f this Summons was accep
by the Resp	ondent on the day	of	, 20	
I he	reby certify that the attached	return receipt was	received by me	showing that the Summon
and a copy	of the Petition was returned	not accepted on the	day of	
20				
I he	reby certify that the attached	return receipt was	received by me	showing that the Summon
and a copy	of the Complaint mailed to t	he Respondent iden	tified on the firs	at page of this Summons w
accepted by	<i>T</i>	on behalf of the	ne Respondent c	on the day of
	, 20			
		Clerk, By:		
		Dy.	Deputy	

STATE OF INDIANA)) SS:	IN THE	SUPERIOR/CIRCUIT COURT
COUNTY OF	,	CASE NO	
IN RE THE MARRIAGE OF:			
Petitioner,			
V.			
Respondent.			
APPEARANCE BY	SELF-	-REPRESENTI	ED PERSON IN CIVIL CASE
This Appearance For	m must	t be filed on beh	nalf of every party in a civil case.
1. My Name is:			and I am
Initiating (filing) X; Responding (answering or of Intervening;	defendir	ng); or	
in this case and am representing my	yself.		
Court Rules: (NOTE: If you are the protection from abuse order, a wor	e Initiat kplace of lega	ting party and th violence restrain	locuments and case information is required by is case, or a related case, involves a ning order, or a no-contact order, you must ments but that address should not be one that
Address:			
Email Address:Phone:FAX:			<u></u>
OR, if in the related case, you have box below:	used th	ne Attorney Gene	eral Confidential address, you may check the
Attorney General confident		,	et the Attorney General at 1-800-321-1907 or
3. This is a case to (Clerk will supply this information)			histrative Rule 8(B)(3).
4. I will accept service by FAX	X at the	following numb	per

delinquency, Child in Need of Services (CH support may be an issue, and social security	ter, involves reciprocal enforcement of support, paternity, INS), guardianship, or any other proceedings in which numbers of all family members are supplied on a separately ed as confidential information on light green paper.
X	
6. There are related cases: YesNo	(If yes, please indicate below.)
Caption and case number of related cases:	
Caption:	Case Number:
7. Additional information required by local	rule:
	Self-Represented Party

NOT FOR PUBLIC ACCESS IN ACCORDANCE WITH ADMINISTRATIVE RULE 9

ATTENTION CLERK: FOR SELF REPRESENTED LITIGANTS, TREAT THIS FORM AS IF IT IS PRINTED ON LIGHT GREEN PAPER

ATTORNEYS MUST SUBMIT THIS FORM ON LIGHT GREEN PAPER. SEE BOTTOM OF PAGE FOR TEXT OF TRIAL RULE 5 (G) (2)

STATE OF INDIANA)		SUPERIOR/CIRCUIT COURT
COUNTY OF) SS: _)		
IN RE THE MARRIAGE OF:			
Petitioner,			
V.			
Respondent.		IL APPEARAN	NCE FORM
Item 5 (Social Sec	curity nur	mbers of all family	members in cases involving support):
Name:		SS #	
Name:		SS #	
Name: Item 8 (Social Sect			s subject to involuntary commitment):

When only a portion of a document contains information excluded from public access pursuant to Administrative Rule 9(G)(1), said information shall be omitted [or redacted] from the filed document and set forth on a separate accompanying document on **light green paper** conspicuously marked "Not For Public Access" and clearly designating [or identifying] the caption and number of the case and the document and location within the document to which the redacted material pertains.

NOT FOR PUBLIC ACCESS

STA	TE OF INDIANA)) SS:	IN THE	SUPERIOR/CIRCUIT COURT
COL	JNTY OF) 33.	CASE NO.	
IN R	E THE MARRIAGE OF:			
Petit	ioner,			
V.				
Resp	oondent.			
7D1			N FOR DISSOLUTION OF	
The	Petitioner,			, now states:
1.	Petitioner and Responde	ent were m	arried on	_, and separated on
2.				has been a
	continuous resident of _		County f	or the last 3 months.
3.				has been a
	continuous resident of the	ne State of	Indiana for the last 6 months	
4.	There are	ch	ildren of the marriage; namel	y:
	<u>Name</u>		Date of birth	
				<u> </u>
				_
5.	That			is fit and proper
	person to have custody of	of the mind	or children.	

Debts	s and property:		
	There are no debts / personal prope	erty to divide.	
	Petitioner wishes the Court to divid	le the following debts / personal	property:
	a		
	b		
	c		
	d		
		is not pregn	ant.
Neith	ner party is a member of the military.		
This	marriage has suffered an irretrievable	breakdown and should be dissol	lved.
Chan	ige of name:		
□ W	Vife would like her former name of _		restored to her.
□ W	Vife does not want to change her name	e.	
I affii	rm under the penalties of perjury that	the foregoing representations are	e true.
	1 0 0		
		Signature	_

STAT	E OF INDIANA)) SS:	IN THE	SUPERIOR/CIRCUIT COURT			
COUN	VTY OF) 55:	CASE NO.				
IN RE	THE MARRIAGE OF:						
Petitio	oner,						
V.							
Respo		TED V	WAIVER OF FI	INAL HEARING			
Verific	Come now Petitioner and Road Waiver of Final Hearing.		*	nd. Code 31-1-11.5-8 and submit their er, the parties state that:			
1.	More than sixty (60) days have elapsed since the filing of Petitioner's Verified Petition for Dissolution of Marriage;						
2.	Both parties request the Cou of Marriage.	ırt to a	pprove their Sett	lement Agreement and Decree of Dissolution			
3.	Both parties voluntarily wai	ve the	opportunity to he	old a final hearing on contested issues.			
I affirı	m under the penalties of perju	ry that	the foregoing re	presentations are true.			
		_					
Your S	Signature		Your	Spouse's Signature			
		- - -					

STA	TE OF I	NDIANA)) SS:	IN THE	SUP	ERIOR/CIRCUIT COURT
COU	JNTY OF	7) 55:	CASE NO.		
IN R	E THE N	MARRIAGE OF:				
Petit	ioner,					
V.						
Resp	ondent.					
	DECR	EE OF DISSOLUTION	ON OI	F MARRIAGE	AND SETTLEM	ENT AGREEMENT
Veri	fied Petit	C	Marria	age and Verified		g seen and considered the earing submitted by the
1.	The pa	arties were married on		,	and separated on _	·
		sident of t months prior to the f			the last three mont	has been a the State of Indiana on of Marriage.
3.						is not pregnant.
4.	Neithe	er party is a member o	f the m	nilitary.		
5.	There	were children born of	this m	narriage; namely;	,	
		<u>Name</u>			Date of birth	
6.	The pa	arties agree and state t	hat it i	s in the best inte	rest of the child(rea	n) that:
		Petitioner shall have	sole p	hysical and legal	l custody of the chi	ld(ren).
		Respondent shall have	ve sole	physical and leg	gal custody of the c	child(ren).
		Petitioner shall have of the child(ren)	sole p	hysical custody	and the parties shall	l have joint legal custody

		Respondent shall have sole physical custody and the parties shall have joint legal custody of the child(ren).
		Other:
7.	The p	arties have agreed on the following Parenting Time (Visitation) order:
		Petitioner shall have reasonable visitation with the minor child(ren) as the parties agree or according to the Indiana Parenting Time guidelines.
		Respondent shall have reasonable visitation with the minor child(ren) as the parties agree or according to the Indiana Parenting Time guidelines.
		Other:
tnrou	gn the C	will pay child support to f per week, as shown by the attached child support worksheet, County Clerk's office, or by income withholding order if available from the employer, the first Friday following the date of the decree. Said date is
first _	be respo	will be responsible for the of uninsured medical expenses for the minor child(ren). Thereafter, Father onsible for% of uninsured medical expenses, and Mother shall be responsible for funinsured medical expenses for the minor child(ren).
9.	The p	arties have agreed on the following provisions for health insurance maintenance:
	medic	shall maintain al, dental, and optical insurance as available through employment on the minor child(ren):
10. and d	_	arties have agreed on the following arrangement for claiming the tax credits, exemptions, as for the minor child(ren):
		Petitioner shall be entitled to claim the minor child(ren) for federal, state, and local income tax purposes on an annual basis; Respondent shall sign all necessary documents that will entitle Petitioner to do so.
		Respondent shall be entitled to claim the minor child(ren) for federal, state, and local income tax purposes on an annual basis; Petitioner shall sign all necessary documents that will entitle Respondent to do so.
		Petitioner and Respondent shall each be entitled to claim the minor child(ren) for federal, state, and local income tax purposes in alternating years; Petitioner shall be entitled to claim the minor child(ren) in the year, and every year thereafter; Respondent shall be entitled to claim the minor child(ren) in the year, and every year thereafter.
		Other:

11.	The parties have agreed on the following debt division:									
		The parties already have divided their debts.								
		Petitioner will be solely responsible for and shall hold Respondent harmless from, the following debts:								
		Name of Creditor	Amount of Debt							
		Respondent will be solely responsible for, and shal following debts:	l hold Petitioner harmless from the							
		Name of Creditor	Amount of Debt							
12.	The p	parties have agreed on the following vehicle division:								
		There are no vehicles to divide.								
		Petitioner will have sole possession of the following vehicles, and Responde execute all documents necessary to transfer title of said vehicles within thirty the date of this Order:								
		Vehicle #1, Make, Model, and Year								
		Vehicle #2, Make, Model, and Year								

		Respondent will have sole possession of the following vehicles, and Petitioner shall execute all documents necessary to transfer title of said vehicles within thirty (30) days of the date of this Order:
		Vehicle #1, Make, Model, and Year
		Vehicle #2, Make, Model, and Year
13.	The p	parties have agreed on the following property division:
		The parties already have divided all items of property.
		Petitioner will have sole possession of the following items of property:
		Respondent will have sole possession of the following items of property:
14. 15.		marriage has suffered an irretrievable breakdown and should be dissolved. ge of names:
		Wife would like her maiden name or previous married name of restored to her.
		Wife does not want to change her name.

The parties have disclosed all relevant documents and exchanged all information on value of property, pensions, real estate, and other assets and debts. The parties agree that this division of property is/is not an approximate equal division of the assets and debts. The parties agree that if this division is not a nearly equal division, that the deviation from the presumptive equal division should be accepted by the Court because it is the parties' agreement and neither party has been forced or threatened to accept this agreement.

Your Signature			
STATE OF INDIANA)	gg.		
COUNTY OF)	SS:		
Before me, County, State of Indiana, personall first duly sworn upon his/her oath, Date	y appeared _		, and he/she being
MY COMMISSION EXPIRES:		Notary Public	
Your Spouse's Signature	_		
STATE OF INDIANA) COUNTY OF)	SS:		
Before me, State of Indiana, personally appear sworn upon his/her oath, says that	edthe facts alle	, a notary public in and for	and he/she being first duly ent are true.
MY COMMISSION EXPIRES:		Notary Public	
IT IS THEREFORE ORDERED terms of their agreement as set out			
Date		Judge	
Distribution:			

I affirm under the penalties of perjury that the foregoing representations are true.

STATE OF INDIANA)) SS:	IN THE		SUPERIOR/CIRCUIT COURT
COUNTY OF) 33.	CASE NO.		
IN RE THE MARRIAGE OF:				
Petitioner,				
V.				
Respondent.				
		SUMMONS		
_		lution of Marriage	•	
The State of Indiana to Respondent:	:			
Court named above. In order to participate in the your attorney. In the event you do not hereof, your marriage can be dissolventered by default, it may contain a child/children, support for your child distribution of assets, and payment of from actions in order to carry out the appearance, you will receive no furt. If you wish to countersue, you do not have the date hereof.	procedured by judgm d/child of debut terms ther not an armonic procedure to the procedure t	edings, you must ener a written appear Decree of the Countent against you and dren, parenting times. The Decree mass of the Court's Decree of these proce	nter a writter rance within art by default d provisions e (visitation) y also requir ecree. If you edings.	t. In the event a Decree is regarding the custody of your with your child/children, re you to take actions or refrain a do not enter a written
Dated:	-	Clerk, _		County
The following manner of Service of Registered / Certified Service by Sheriff or Service by Sheriff at	d Mail 1 Indiv	to be sent by the Cridual at address sh	Clerk own above	ldress of spouse's employer):

SHERIFF'S RETURN OF SERVICE OF SUMMONS

I hereby ce	rtify that I have serve	ed this summons on the _	day of	
1.	By delivering a c	opy of the Summons and	d a copy of the Pe	etition to the Respondent
identified o	on the first page of Su	immons.		
2.	By leaving a cop	y of the Summons and a	copy of the Petit	ion at
		, which	is the dwelling p	lace or usual place of abode of
and by mai	ling a copy of the Su	mmons to the Responder	nt at the above ad	ldress.
3.	Other Service or	Remarks:		
	Sheriff's Costs	She By:	riff	
		By.	Deputy	
	C	LERK'S CERTIFICAT	TE OF MAILIN	\mathbf{G}
I he	reby certify that on t	ne day of	, 20	, I mailed a copy of this
Summons a	and a copy of the Pet	tion to the Respondent i	dentified on the f	First page of the Summons by
(registered	or certified mail), [] requesting a return re	eceipt, at the addr	ress provided by the Petitioner.
		Cle	rk,	
Dated:	, 20	By:	Deputy	
	RETU	RN ON SERVICE OF	1 0	MAIL
I he				ying that the Summons and a
		-	·	of this Summons was accepted
		day of		-
				e showing that the Summons
		_	-	_
	of the Fethion was fo	sturned not accepted on	.ne day o	f,
20	1		. 11	1 ' 1 (1 0
				e showing that the Summons
	-	-		irst page of this Summons was
		on behalf o	of the Responden	t on the day of
	, 20			
		Clea By:	rk,	County
		By.	Deputy	